

Child Survival and Health Grants Program

**Update on HIV/AIDS
Prevention and Control**

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Global Perspective

- Clear priorities (Tx, palliative care, prevention and PMTCT, OVC)
- Prevention remains a key intervention
- Prevention-Care Continuum – resource and technical balance required
- NGOs have robust platforms to complement USG/HG efforts
- GFATM – EPFAR interface – USAID's leadership role on CCMs
- Windows of opportunity in other countries – India, Russia, China, SE Asia
- Do it right...Do no harm...
- Real-world hurdles exist...no magic bullets

USAID's Technical Strategy

- Prevention
- Care, treatment and support
- Assisting children affected by AIDS – OVC
- Surveillance
- Coordinate with other donors
- Engaging national leaders
- Research
- Expanded partnerships including private-public

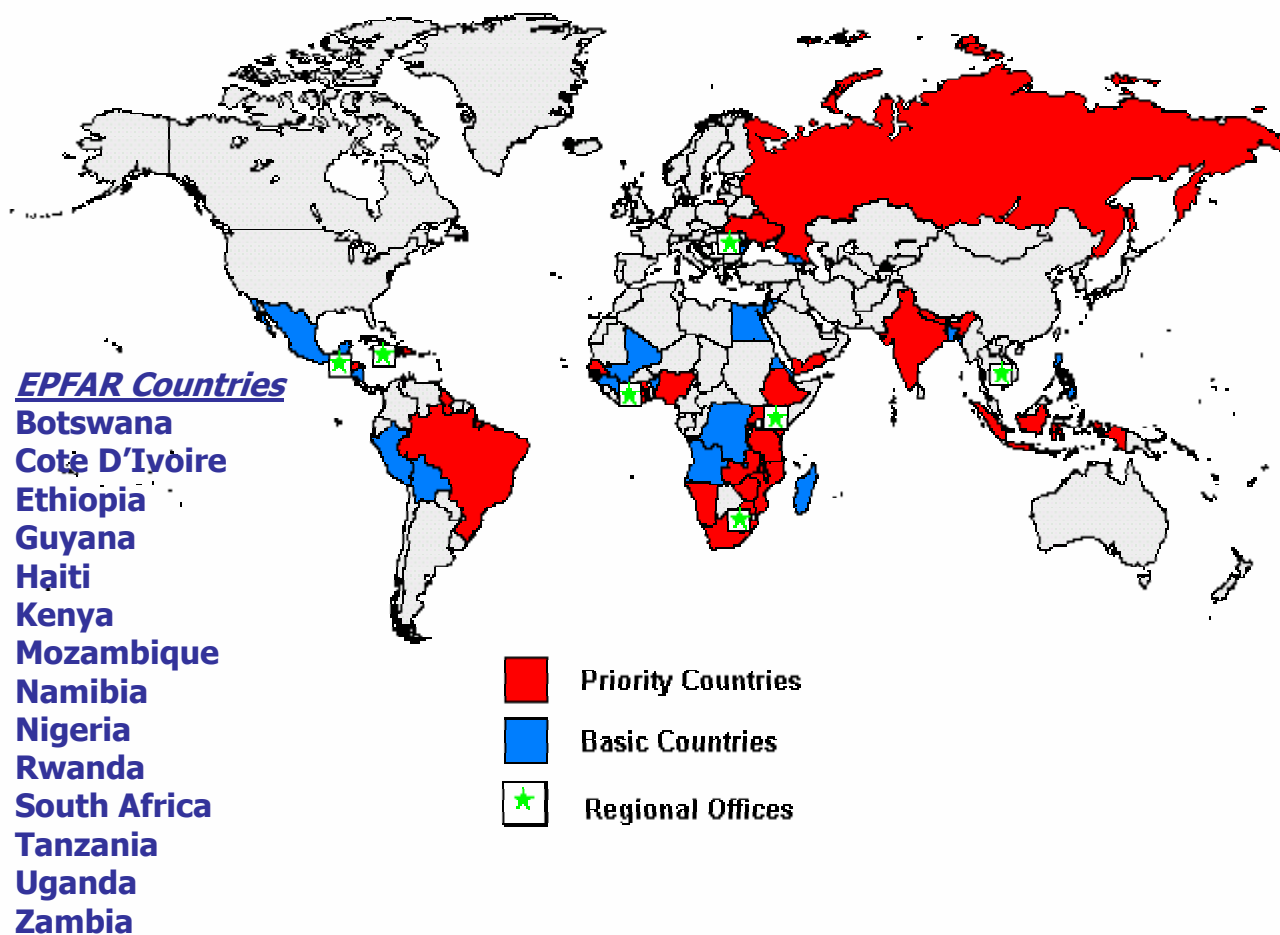
USAID HIV/AIDS Program Objectives

- Prevent new infections in at-risk populations
 - Reduce HIV among 15-24 yr-olds by 50% in high-risk settings
- Maintain prevalence below 1% in low prevalence settings
- A+B+C
 - Abstinence/delayed sexual debut
 - Being faithful/partner reduction
 - Consistent and correct condom use for those engaging in high-risk behavior
- PMTCT - ensure at least 25% of HIV+ mothers have access to interventions to reduce vertical transmission
- Care & Support - Help local institutions provide basic care to 25% of HIV+ persons
- OVC - Provide community support to at least 25% of children affected by AIDS

President's Emergency Plan for AIDS Relief – Treatment, Palliative Care, Prevention (including MTCT), OVC

- 5-year; \$15 billion plan of action (12 African, 2 LAC countries)
- Prevent 7 million new infections
- Treat 2 million HIV-infected people
- Care for 10 million HIV-infected individuals and AIDS orphans
- USAID goals clearly support the achievement of EPFAR goals
- Niches need to be defined for USG institutions and partners

USAID Support for HIV/AIDS Programs 2003



HIV/AIDS Country Categories

- Rapid Scale-Up

- Cambodia
- Kenya
- Uganda
- Zambia

- Intensive Focus

- Brazil
- Dominican Republic
- Ethiopia
- Ghana
- Haiti
- Honduras

- India

- Indonesia
- Malawi
- Mozambique
- Nepal
- Nigeria
- Russia
- Rwanda
- Senegal
- South Africa
- Tanzania
- Ukraine
- Zimbabwe

- Regional Programs

- ESAfr
- SAfr
- WAfr
- Thai Regional Office
- Caribbean
- G-CAP
- CAR

Building on the Development Platform

- PVOs have a vast platform on which to deliver services for HIV prevention and control
- Linkages to existing CS Grants can and should be considered
- Integrating HIV service delivery and PEPFAR objectives
- Niches you occupy and complementarity you can offer
- Begin to set the stage for treatment (ARV, OIs, STIs/RTIs)
 - Homecare models? Community-based observed-therapy?
- Grassroots destigmatization; expanded community responsibility
- Functional synergy...
- Systemic strengthening to deliver PEPFAR outcomes
- Engagement in the GFATM at CCM level –
- Build on your formidable strengths

New Partnerships and Potentials

- Partnering with established and burgeoning organizations offers new potentials
- Partnering with local civil, community and faith-based NGOs can expand outreach
- Local and international NGOs (including faith-based organizations) have much to offer in the HIV/AIDS arena
 - Prevention and especially prevention for youth
 - Care and support (community/household)
 - PMTCT+
 - Treatment
- Public-private sector partnerships

Clear Objectives and Measurable Outcomes

- People-level impacts
- People reached with prevention (estimates of cases avoided)
- Number persons tested and counseled
- Infections averted
- Women screened for MTCT services and who received ARVs
- Infant infections averted
- Delay (Increased age) of sexual debut
- Reduction in multiple partners
- Condoms consistently and correctly used (sales data)
- Set quantifiable objectives, empirical baselines when possible
- Report concisely and replicate positive lessons – characterize shortcomings

Real World Challenges

- Formidable targets
- Scaling up/capacity building
- Absorptive capacity
- Logistics of service delivery
- <5% of infected people in PI countries know they're infected
- Massive (VCT) screening (50m-100m) will be required to treat 2 million effectively
- Political advocacy and behavior change/communication
- Treatment forever
- Others...
- How can the PVO community enunciate and help address these and other challenges...?

Implementing Partners

- Mission Programs including CS Grants and other NGO mechanisms
- OHA Flagship Programs
 - IMPACT
 - AIDSMARK
- OHA NGO Support Mechanisms
 - AIDS ALLIANCE
 - REACH
 - CORE
- OHA Youth Prevention
 - YOUTHNET
 - PEACE CORPS
- New Starts to meet Presidential Initiative

Conclusion

- NGOs are a vital part of the solution
- New horizons exist for expansion, building on present platforms
 - Links to CS, RH, ID, Title II and other NGO efforts
- Establish empirical M&E systems as appropriate
- Document results positive and negative
- Opportunity for new partnerships
- Do it right; do no harm